CITY OF FLORIDA CITY

Building and Zoning Department 404 West Palm Drive Florida City, F L 33034 305-247-8222

SIGN PERMIT APPLICATION

IF SUBSIDIARY, PROVIDE MASTER PERMIT NUMBER HERE:	
Location of Improvements	Building Sign (Sq. Ft.)
Address Unit	Pole Sign (Sq.Ft.)
Folio	Change Out (Sq. Ft.)
Contractor Information	Other
Cert.No.	Other
Contractor Name	
Qualifier Name	·
Qualifier SS	
Address	
City St Zip	
Phone	
	•
Use of Property	
Current Use	
Description of Work	
Value of Work	
Type of Improvements	1
() New Construction () Repair	
() Repair due to Fire	
() Alteration Interior () Renewal	
() () Change of Contractor	
Owner Information	
Name	
Address	
City St Zip	
Phone	Note: 2 copies of the Property Survey or Site Plan
Architect/ Engineer	must be submitted showing the location of all existing
Name	and proposed signs. Square footage for signs must be listed individually and totaled.
Address	
City St Zip	
Phone	1
Application is hereby made to obtain a permit to do the work and installatio of all laws regulating construction in this jurisdiction. I understand that sepa Mechanical, Window, Shutters and Roofing work and there may be addition OWNER'S AFFIDAVIT: I certify that all the foregoing information is accu WARNING TO OWNER: If your job cost exceeds \$2500.00 you must file a County. Failure to do so may result in you paying twice for the improvement	nal permits required from other governmental agencies. Irrate. a Notice of Commencement with the Clerk of the Courts in Miami-Dade
attomey or lender before recording your Notice of Commencement.	
Signature of Owner or Owners Agent Print Name	Signature of Qualifier Print Name
Sworn to and subscribed to me thisday of20	Sworn to and subscribed to me thisday of20
Personally known () Produced Identification ()	Personally known () Produced Identification ()
Type of identification Produced	Type of Identification Produce